| | | | | | cument Page 1 of 24 | | | |
|-----------|---|-----------------|-----------------------|---------------------------------------|--|--|---------------------------|--|
| | n this informatio | n to identify | your case and th | is filing | i: | | | |
| Debte | | Camara J Th | | Name | Last Name | | | |
| Debte | | 15t Name | Wildale | IName | Lastivallie | | | |
| | | irst Name | Middle | Name | Last Name | | | |
| Unite | ed States Bankrup | ptcy Court for | the: EASTERN | DISTRIC | CT OF PENNSYLVANIA | | | |
| Case | e number | 4564 | | | | | _ | Check if this is an amended filing |
| | | | | | | | | |
| _ | icial Form | | _ | | | | | |
| <u>5C</u> | hedule <i>l</i> | <u> 4/B: Pr</u> | roperty | | | | | 12/15 |
| nswe | er every question. Describe Each | Residence, Bı | uilding, Land, or Ot | her Real | Estate You Own or Have an Interest In | | | |
| . Do | you own or have a | any legal or eq | uitable interest in a | ny resido | ence, building, land, or similar property? | | | |
| | No. Go to Part 2. | | | | | | | |
| | Yes. Where is the | property? | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 1.1 | | | | What | is the property? Check all that apply | | | |
| _ | 7960 Bayard S Street address, if avail | | crintion | | Single-family home | Do not deduct secured | | |
| | , | , | | | Duplex or multi-unit building | the amount of any occu | | |
| | | | cription | | • | Creditors Who Have C | | s on Schedule D: |
| | | | Сприоп | | Condominium or cooperative | Creditors Who Have C | | s on Schedule D: |
| | Dhiladalahia | DA | | | Condominium or cooperative Manufactured or mobile home | Current value of the | laims Sec Curr | s on Schedule D: cured by Property. |
| - | Philadelphia City | PA State | 19150-0000 | | Condominium or cooperative Manufactured or mobile home Land | Current value of the entire property? | laims Sec Curr port | s on Schedule D: ured by Property. rent value of the ion you own? |
| - | Philadelphia City | PA State | | | Condominium or cooperative Manufactured or mobile home | Current value of the entire property? | Curr port | rent value of the ion you own? \$155,815.00 |
| - | • | | 19150-0000 | | Condominium or cooperative Manufactured or mobile home Land Investment property | Current value of the entire property? \$155,815.00 Describe the nature o (such as fee simple, t | Curr port | rent value of the ion you own? \$155,815.00 whereship interest |
| - | • | | 19150-0000 | Whol | Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one | Current value of the entire property? \$155,815.00 Describe the nature o (such as fee simple, t a life estate), if known | Curr port | rent value of the ion you own? \$155,815.00 |
| _ | City | | 19150-0000 | Who I | Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only | Current value of the entire property? \$155,815.00 Describe the nature o (such as fee simple, t | Curr port | rent value of the ion you own? \$155,815.00 |
| _ | • | | 19150-0000 | Whol | Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only | Current value of the entire property? \$155,815.00 Describe the nature of (such as fee simple, the alife estate), if known Fee simple | Curry port | rent value of the ion you own? \$155,815.00 whereship interest by the entireties, or |
| _ | City Philadelphia | | 19150-0000 | | Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only | Current value of the entire property? \$155,815.00 Describe the nature o (such as fee simple, t a life estate), if known | Curry port | rent value of the ion you own? \$155,815.00 whereship interest by the entireties, or |
| _ | City Philadelphia | | 19150-0000 | □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ | Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item | Current value of the entire property? \$155,815.00 Describe the nature of (such as fee simple, the alife estate), if known Fee simple Check if this is continuous (see instructions) | Curry port | rent value of the ion you own? \$155,815.00 whereship interest by the entireties, or |
| _ | City Philadelphia | | 19150-0000 | □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ | Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? \$155,815.00 Describe the nature of (such as fee simple, the alife estate), if known Fee simple Check if this is continuous (see instructions) | Curry port | rent value of the ion you own? \$155,815.00 whereship interest by the entireties, or |
| _ | City Philadelphia | | 19150-0000 | □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ | Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item | Current value of the entire property? \$155,815.00 Describe the nature of (such as fee simple, the alife estate), if known Fee simple Check if this is continuous (see instructions) | Curry port | rent value of the ion you own? \$155,815.00 whereship interest by the entireties, or |
| _ | City Philadelphia | | 19150-0000 | □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ | Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item | Current value of the entire property? \$155,815.00 Describe the nature of (such as fee simple, the alife estate), if known Fee simple Check if this is continuous (see instructions) | Curry port | rent value of the ion you own? \$155,815.00 whereship interest by the entireties, or |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 18-14564-mdc Doc 12 Filed 07/25/18 Entered 07/25/18 01:03:38 Desc Main Page 2 of 24 Document Case number (if known) 18-14564 Debtor 1 Camara J Thorpe 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Lincoln Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Navigator** ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model 2007 Year: Debtor 2 only Current value of the Current value of the 167000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$7,555.00 \$7,555.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7,555.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Misc. Household Goods and Furnishings \$3.500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No ■ Yes. Describe..... 2 TV \$750.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No

10. Firearms

☐ Yes. Describe.....

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

| | Case 18-1450 | 64-mdc | Doc 12 | | Entered 07/25/18 0 | 1:03:38 Desc Main |
|--------------|---|----------------|-------------------|---|----------------------------------|--|
| Debtor 1 | Camara J The | orpe | | Document P | age 3 of 24 Case number | (if known) 18-14564 |
| □ Ye | es. Describe | | | | | |
| | mples: Everyday clo | thes, furs, I | eather coats, de | esigner wear, shoes, acc | ressories | |
| | | Misc. Me | n's clothing | | | \$500.00 |
| | | | _ | | | <u> </u> |
| ■ No | <i>mples:</i> Everyday jew | velry, costui | me jewelry, eng | gagement rings, wedding | rings, heirloom jewelry, watches | s, gems, gold, silver |
| Exa ■ No | -farm animals amples: Dogs, cats, b o es. Describe | oirds, horses | 3 | | | |
| | | | | | | |
| ■ No | | | d items you di | d not already list, inclu | ding any health aids you did n | ot list |
| | | | | Part 3, including any e | ntries for pages you have atta | stand \$4,750.00 |
| | Describe Your Financ | | | | | |
| Do you | own or have any le | gai or equ | table interest | in any of the following? | • | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | <i>mples:</i> Money you h | | | home, in a safe deposit b | oox, and on hand when you file y | our petition |
| | | | | | Cash | \$50.00 |
| Exa | institutions. I | | | counts; certificates of de tts with the same instituti Institution name | on, list each. | okerage houses, and other similar |
| | | 17.1. C | hecking | Bank of Ame | rica | \$650.00 |
| | | 17.2. S | avings | Bank of Ame | rica | \$1,500.00 |
| Exa | | | | orokerage firms, money r | narket accounts | |
| ■ No | 9S | Ins | titution or issue | er name: | | |
| join □ No | t venture | | | | rated businesses, including a | n interest in an LLC, partnership, and |

Schedule A/B: Property

| Debtor 1 | Case 18-14564-mdc Doc 12 Camara J Thorpe | | Entered 07/25/18 01: ge 4 of 24 Case number (if h | :03:38 Desc Main |
|------------------------|--|----------------------------------|---|---|
| Dobtor 1 | Name of entity: | | % of ownership: | |
| | Tatiana's Luxury | Limo | 100 | % Unknown |
| Nego: Non-r ■ No | rnment and corporate bonds and other n tiable instruments include personal checks, negotiable instruments are those you canno . Give specific information about them Issuer name: | cashiers' checks, promissor | y notes, and money orders. | |
| Exam ■ No | ment or pension accounts sples: Interests in IRA, ERISA, Keogh, 401(I List each account separately. Type of account: | k), 403(b), thrift savings acco | unts, or other pension or profit-sl | naring plans |
| Your s Exam ■ No | ity deposits and prepayments share of all unused deposits you have mad uples: Agreements with landlords, prepaid re | | as, water), telecommunications of | companies, or others |
| | i ties (A contract for a periodic payment of m | noney to you, either for life or | for a number of years) | |
| ■ No | lssuer name and descriptio | | , , | |
| | sts in an education IRA, in an account in a.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | | · | . • |
| | | | ords of any interests.11 U.S.C. § | , , |
| ■ No | equitable or future interests in propert Give specific information about them | y (other than anything liste | d in line 1), and rights or powe | ers exercisable for your benefit |
| Exam ■ No | ts, copyrights, trademarks, trade secrets aples: Internet domain names, websites, pro | | | |
| Exam ■ No | ses, franchises, and other general intangular interples: Building permits, exclusive licenses, of the control o | | ngs, liquor licenses, professional | licenses |
| | property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | efunds owed to you . Give specific information about them, inclu | uding whether you already file | ed the returns and the tax years | |
| 29. Family Exam | y support <i>pples:</i> Past due or lump sum alimony, spous | al support, child support, ma | intenance, divorce settlement, pr | roperty settlement |

Official Form 106A/B Schedule A/B: Property page 4

 $\hfill \square$ Yes. Give specific information.....

Case 18-14564-mdc Doc 12 Filed 07/25/18 Entered 07/25/18 01:03:38 Page 5 of 24 Document Case number (if known) 18-14564 Debtor 1 Camara J Thorpe 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Π Nο Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Life Insurance - Term Life Alexis Thorpe -\$0.00 **Debtor's Wife** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,200.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) 18-14564 Document

Debtor 1 Camara J Thorpe

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|-------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | \$155,815.00 |
| 56. | Part 2: Total vehicles, line 5 | \$7,555.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$4,750.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$2,200.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$14,505.00 | Copy personal property total | \$14,505.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$170,320.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|----------------|---------------------------------|
| Debtor 1 | Camara J Thorpe |) | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | F PENNSYLVANIA | |
| _ | 18-14564 | | | |
| (if known) | | | | Check if this is amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exempt |
|---|
|---|

| | ☐ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | | | |
|---|--|--------------------------------------|--------|---|------------------------------------|--|--|--|--|
| | ■ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | | |
| | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | | |
| 1 | 7960 Bayard Street Philadelphia, PA 19150 Philadelphia County | \$155,815.00 | | \$4,072.00 | 11 U.S.C. § 522(d)(1) | | | | |
| | Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 2007 Lincoln Navigator 167000 miles Line from Schedule A/B: 3.1 | \$7,555.00 | | \$3,775.00 | 11 U.S.C. § 522(d)(2) | | | | |
| | Line from Scriedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 2007 Lincoln Navigator 167000 miles | \$7,555.00 | | \$3,780.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Line Irom Scriedule AVB. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Misc. Household Goods and Furnishings | \$3,500.00 | | \$3,500.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 2 TV Line from Schedule A/B: 7.1 | \$750.00 | | \$750.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | LINE HOTH SCHEdule AVD. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |

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| Camara J Thorpe | | | Case number (if known) | 18-14564 |
|---|---|--|--|--|
| | Current value of the portion you own | Amo | Specific laws that allow exemption | |
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| G , , , | \$500.00 | | \$500.00 | 11 U.S.C. § 522(d)(3) |
| ie IIOM Scriedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(5) |
| ie IIIIII Schedule PAB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| • | \$1,500.00 | | \$1,500.00 | 11 U.S.C. § 522(d)(5) |
| ie IIOIII Scriedule AVB. 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| ubject to adjustment on 4/01/19 and every No | 3 years after that for ca | ises fi | , | , |
| | ubject to adjustment on 4/01/19 and every No | ief description of the property and line on chedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B isc. Men's clothing | ief description of the property and line on chedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B isc. Men's clothing ne from Schedule A/B: 11.1 ash ne from Schedule A/B: 16.1 svings: Bank of America ne from Schedule A/B: 17.2 re you claiming a homestead exemption of more than \$160,375? ubject to adjustment on 4/01/19 and every 3 years after that for cases files. | isc. Men's clothing he from Schedule A/B: 11.1 Stool of the from Schedule A/B: 11.1 Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit Stool of fair market value, up to any applicable statutory limit |

| | Document | Page 9 of 24 | | |
|---|--|--|--------------------------|-------------------|
| Fill in this information to identify | your case: | | | |
| Debtor 1 Camara J Th | orpe | | | |
| First Name | . | ast Name | - | |
| Debtor 2 (Spouse if, filling) First Name | Middle Name L | ast Name | - | |
| (Spouse if, filing) First Name | Middle Name L | ast name | | |
| United States Bankruptcy Court for | the: EASTERN DISTRICT OF PENNS | YLVANIA | _ | |
| Case number 18-14564 | | | | |
| (if known) | | | ☐ Check | if this is an |
| | | | ameno | led filing |
| Official Form 100D | | | | |
| Official Form 106D | | | | |
| Schedule D: Credito | rs Who Have Claims Se | ecured by Propert | : y | 12/15 |
| | ole. If two married people are filing together, I it out, number the entries, and attach it to t | | | |
| 1. Do any creditors have claims secure | d by your property? | | | |
| | nit this form to the court with your other so | hedules. You have nothing else | to report on this form. | |
| Yes. Fill in all of the informati | • | g | | |
| | on below. | | | |
| Part 1: List All Secured Claims | | Column A | Column B | Column C |
| | as more than one secured claim, list the creditors in has a particular claim, list the other creditors in | | Value of collateral | Unsecured |
| much as possible, list the claims in alpha | betical order according to the creditor's name. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 M & T Bank | Describe the property that secures the | | \$155,815.00 | \$0.00 |
| Creditor's Name | 7960 Bayard Street Philadelph 19150 Philadelphia County | ia, PA | | |
| Po Box 844 | As of the date you file, the claim is: Che | eck all that | | |
| Buffalo, NY 14240 | apply. □ Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| | ■ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mor | rtgage or secured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mecha | nic's lien) | | |
| At least one of the debtors and another | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Opened | | | | |
| 09/13 Las Active | st | | | |
| Date debt was incurred 4/27/15 | Last 4 digits of account number | 7145 | | |
| Philadelphia Dept of Water Revenue | Describe the property that secures the | claim: \$1,024.00 | \$155,815.00 | \$0.00 |
| Creditor's Name | 7960 Bayard Street Philadelph 19150 Philadelphia County | | | · |
| | As of the date you file, the claim is: Che | ack all that | | |
| MSB - 1401 JFK Blvd | apply. | on all that | | |
| Philadelphia, PA 19102 | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mor | rtgage or secured | | |
| ☐ Debtor 2 only | car loan) | | | |

Official Form 106D

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

Case 18-14564-mdc Doc 12 Filed 07/25/18 Entered 07/25/18 01:03:38 Desc Main Document Page 10 of 24

| Debtor 1 | Camara J Thorpe | | | Case number (if know) | 18-14564 | |
|--|--|--------------------------|-----------------------------|-----------------------|----------|--|
| | First Name | Middle Name | Last Name | | | |
| | if this claim relates to a unity debt | Other (include | ding a right to offset) | | | |
| Date debt was incurred Last 4 digits of account numb | | igits of account number | | | | |
| | deller velve of very out | rice in Column A on this | none Write that number have | ¢452.767 | 00 | |
| Add the dollar value of your entries in Column A on this page. Write that numl | | | | \$152,767. | 00 | |
| If this is the last page of your form, add the dollar value totals from all pages. Write that number here: | | | otais from an pages. | \$152,767. | 00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 7430 10 14004 Mao | Document | Page 1 | 1 of 24 | Best Main |
|--|---|---|------------------------|---|-----------------------------|
| Fill in this | s information to identify your o | | | | |
| Debtor 1 | Camara J Thorpe | | | | |
| Dobtor ! | First Name | Middle Name | Last Name | | |
| Debtor 2 | - \ | A | | | |
| (Spouse if, fil | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | EASTERN DISTRICT OF I | PENNSYLVANIA | | |
| Case num | nber 18-14564 | | | | |
| (if known) | 10 14004 | | | | Check if this is an |
| | | | | | amended filing |
| Official | Form 106E/F | | | | |
| | ule E/F: Creditors W | ha Haya Uncasur | ad Claima | | 12/15 |
| | | | | Part 2 for creditors with NONPRIORITY | |
| schedule D eft. Attach ame and c | : Creditors Who Have Claims Sect the Continuation Page to this pag ase number (if known). | ured by Property. If more spac e. If you have no information t | e is needed, copy | any creditors with partially secured cla the Part you need, fill it out, number the do not file that Part. On the top of any a | entries in the boxes on the |
| Part 1: | List All of Your PRIORITY Un | | | | |
| | creditors have priority unsecured | d claims against you? | | | |
| _ | Go to Part 2. | | | | |
| ☐ Yes | | | | | |
| Part 2: | List All of Your NONPRIORIT | | | | |
| | creditors have nonpriority unsec | | | | |
| ⊔ No. | You have nothing to report in this pa | art. Submit this form to the court | with your other sche | edules. | |
| Yes | S. | | | | |
| unsecu | ared claim, list the creditor separately ne creditor holds a particular claim, li | for each claim. For each claim I | isted, identify what t | b holds each claim. If a creditor has more ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out | included in Part 1. If more |
| | | | | | Total claim |
| 4.1 A | mex | Last 4 digits of | account number | 7463 | \$1,394.00 |
| | onpriority Creditor's Name | | | One and 00/07 set Active | |
| | orrespondence o Box 981540 | When was the | debt incurred? | Opened 08/97 Last Active 10/31/15 | |
| | l Paso, TX 79998 | | | 10,01,10 | |
| | umber Street City State Zlp Code | As of the date | you file, the claim | is: Check all that apply | |
| _ | ho incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | l | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | |
| | At least one of the debtors and and | | RIORITY unsecure | d claim: | |
| | Check if this claim is for a comm | | | | |
| | ebt the claim subject to offset? | ☐ Obligations a report as priority | | ration agreement or divorce that you did n | ot |
| | No | | | g plans, and other similar debts | |
| |] _{Yes} | · | credit Card | = : | |
| | 4 100 | Other. Speci | my Sicult Care | • | |

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| Debto | or 1 Camara J Thorpe | | Case number (if know) 18-14564 | |
|-------|--|--|---|------------|
| 4.2 | Bank Of America | Last 4 digits of account number | 3178 | \$2,532.00 |
| | Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim | Opened 08/13 Last Active 7/13/15 is: Check all that apply | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | , | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated ☐ Disputed | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | Type of NONPRIORITY unsecured Student loans | ration agreement or divorce that you did not | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.3 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 3507 | \$2,427.00 |
| | Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 10/09 Last Active 8/04/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | d claim: | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.4 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 9893 | \$887.00 |
| | Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 11/09 Last Active 7/22/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | d claim: | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card | | |

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| or 1 Camara J Thorpe | | Case number (if know) 18-14564 | |
|---|--|---|------------|
| Capital One | Last 4 digits of account number | 9879 | \$762.00 |
| Nonpriority Creditor's Name Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 07/11 Last Active 6/23/15 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Convergent Outsoucing, Inc | Last 4 digits of account number | 8991 | \$1,506.00 |
| Nonpriority Creditor's Name Po Box 9004 Renton, WA 98057 | When was the debt incurred? | Opened 04/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Collection | Attorney Sprint | |
| Credit One Bank Na | Last 4 digits of account number | 5179 | \$1,127.00 |
| Nonpriority Creditor's Name Po Box 98873 Las Vegas, NV 89193 | When was the debt incurred? | Opened 11/09 Last Active 5/03/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | <u> </u> | |
| ■ No | Debts to pension or profit-sharir | | |
| ☐ Yes | ■ Other. Specify Credit Card | I | |

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Case number (if know) 18-14564

| Deb | Camara J I norpe | | Case number (if know) 18-14564 | | | | | |
|----------|--|--|---|-------------|--|--|--|--|
| 4.8 | Discover Financial | Last 4 digits of account number | 0045 | \$6,329.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 | When was the debt incurred? | Opened 08/13 Last Active 12/17/15 | | | | | |
| | New Albany, OH 43054 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Credit Card | l | | | | | |
| 4.9 | Fingerhut | Last 4 digits of account number | 2756 | \$794.00 | | | | |
| | Nonpriority Creditor's Name | _ | | | | | | |
| | 6250 Ridgewood Rd St Cloud, MN 56303 | When was the debt incurred? | Opened 11/08 Last Active 9/01/15 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | | | | | | |
| | 1 | | | | | | | |
| 4.1 0 | First Data | Last 4 digits of account number | 9000 | \$1,509.00 | | | | |
| | Nonpriority Creditor's Name 5565 Glenridge Connector NE Ste 2000 Atlanta, GA 30342 | When was the debt incurred? | Opened 6/01/15 Last Active 5/09/16 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | | aration agreement or divorce that you did not | | | | | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharir | a plane, and other similar debte | | | | | |
| | ■ No | · | y pians, and other similal debts | | | | | |
| | ☐ Yes | Other, Specify Lease | | | | | | |

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| Camara J Inorpe | | (if know) 18-14564 | |
|---|--|--|-------------|
| First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 4433 | \$797.00 |
| 601 S Minneaplois Ave Dious FDalls, SD 57104 | When was the debt incurred? | Opened 01/09 Last Active 7/30/15 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| First Premier Bank | Last 4 digits of account number | 1732 | \$778.00 |
| Nonpriority Creditor's Name | | Opened 06/09 Leet Active | |
| 601 S Minneaplois Ave Dious FDalls, SD 57104 | When was the debt incurred? | Opened 06/08 Last Active 7/17/15 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Ford Motor Credit | Last 4 digits of account number | 7193 | \$14,980.00 |
| Nonpriority Creditor's Name | | | |
| Po Box 62180 Colorado Springs, CO 80962 | When was the debt incurred? | Opened 01/14 Last Active 1/22/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | | |
| ☐ Yes | Other Specify Automobile | <u> </u> | |

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| Debtor 1 | Camara J | Thorpe | | Case n | umber (if know) | 18-14564 | | | |
|----------------------------|---|---|---|---------------|---------------------|---------------------|-------------------------|--|--|
| 7 | Ginnys/Swi Nonpriority Cre | ss Colony Inc | Last 4 digits of account number | 3630 |) | _ | \$1,261.00 | | |
| | 1112 7th Av Monroe, Wi | <i>r</i> e | When was the debt incurred? | Open 7/03/ | ned 08/09 Las 15 | t Active | | | |
| 1 | Number Street | City State Zlp Code the debt? Check one. | As of the date you file, the claim | is: Check | all that apply | | | | |
| ı | ■ Debtor 1 on | lv | ☐ Contingent | | | | | | |
| _ | Debtor 2 on | , | ☐ Unliquidated | | | | | | |
| _ | | d Debtor 2 only | ☐ Disputed | | | | | | |
| | _ | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| _ | _ | is claim is for a community | ☐ Student loans | | | | | | |
| (| debt | bject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration ag | reement or divorce | e that you did not | | | |
| | ■ No | | Debts to pension or profit-sharin | ıa nlans a | and other similar d | ehts | | | |
| | | | · · · | • | and other similar d | CDIS | | | |
| | ☐ Yes | | Other. Specify Charge Acc | count | | | | | |
| 0 | | al Account Management | Last 4 digits of account number | 7312 | | _ | \$240.00 | | |
| ; | Nonpriority Cree 633 W Wisc Suite 600 | consin Ave | When was the debt incurred? | | | | | | |
| 1 | | City State Zlp Code the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | | |
| I | ■ Debtor 1 on | ly | ☐ Contingent | | | | | | |
| | Debtor 2 on | ly | ☐ Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | | | ☐ Disputed | | | | | | |
| ı | ☐ At least one of the debtors and another | | Type of NONPRIORITY unsecured claim: | | | | | | |
| ı | ☐ Check if thi | is claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim su | bject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| I | ■ No | | Debts to pension or profit-sharing | ig plans, a | and other similar d | ebts | | | |
| ļ | ☐ Yes | | ■ Other. Specify District Of | Columi | bia Govt | | | | |
| Part 3: | List Others | s to Be Notified About a Debt | That You Already Listed | | | | | | |
| is trying have m | g to collect fro ore than one o I for any debts | m you for a debt you owe to some creditor for any of the debts that yo in Parts 1 or 2, do not fill out or si | . 0 | Parts 1 | or 2, then list the | collection agency l | nere. Similarly, if you | | |
| Part 4: | Add the A | mounts for Each Type of Unse | cured Claim | | | | | | |
| | ne amounts of unsecured cla | | . This information is for statistical re | eporting | purposes only. 2 | 8 U.S.C. §159. Add | the amounts for each | | |
| | | | | _ | | l Claim | | | |
| To clai | 6a. otal | Domestic support obligations | | 6a. | \$ | 0.00 | | | |
| from Pa | | Taxes and certain other debts yo | ou owe the government | 6b. | \$ | 0.00 | | | |
| | 6c. | Claims for death or personal inju | ıry while you were intoxicated | 6c. | \$ | 0.00 | | | |
| | 6d. | Other. Add all other priority unsecu | ured claims. Write that amount here. | 6d. | \$ | 0.00 | | | |
| | 6e. | Total Priority. Add lines 6a throug | h 6d. | 6e. | \$ | 0.00 | | | |
| | | | | | Tota | l Claim | | | |
| To clai | 6f. | Student loans | | 6f. | \$ | 0.00 | | | |
| from Pa | | Obligations arising out of a sepa | ration agreement or divorce that | 6g. | \$ | 0.00 | | | |

Official Form 106 E/F

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Page 17 of 24 Case number (if know) Debtor 1 Camara J Thorpe 18-14564 you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 37,323.00 Total Nonpriority. Add lines 6f through 6i. 6j. 37,323.00

| | | | 111 1 auc. 10 01 2 -1 |
|---------------------|---------------------------|--------------------|----------------------------------|
| Fill in this info | ormation to identify your | case: | |
| Debtor 1 | Camara J Thorpe | • | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court for the: | EASTERN DISTRICT C | F PENNSYLVANIA |
| Case number | 18-14564 | | |
| (if known) | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the r, Street, City, State and ZIP | e contract or lease Code | State what the contract or lease is for |
|-----|-----------|--------------|---|-----------------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | Oity | | Otate | Zii Code | |
| 2.0 | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | Oity | | Otate | ZII OOUE | |
| 0 | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |

| Fill in this | s information to identify your | Document case: | t Page 19 of | 24 | | |
|---|---|---|---|--|---------------|---------------------------------|
| Debtor 1 | Camara J Thorpe | | | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, fil | ing) First Name | Middle Name | Last Name | | | |
| United Sta | ates Bankruptcy Court for the: | EASTERN DISTRICT OF I | PENNSYLVANIA | | | |
| Case num (if known) | nber <u>18-14564</u> | | | | _ | eck if this is an nended filing |
| | ll Form 106H | | | | | |
| Sched | dule H: Your Cod | ebtors | | | | 12/15 |
| people are fill it out, a your name | s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known) you have any codebtors? (If | ally responsible for supply boxes on the left. Attach th . Answer every question. | ing correct informatione Additional Page to | n. If more space is nee this page. On the top | eded, copy t | the Additional Page, |
| _ | | , | • | | | |
| ■ No □ Ye | | | | | | |
| 2. Wit | thin the last 8 years, have you na, California, Idaho, Louisiana, | | | | states and te | rritories include |
| | . Go to line 3. s. Did your spouse, former spot | use, or legal equivalent live w | vith you at the time? | | | |
| in line Form | lumn 1, list all of your codebt e 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2. | f that person is a guarantoi | r or cosigner. Make su | ire you have listed the | creditor on | Schedule D (Official |
| | Column 1: Your codebtor Name, Number, Street, City, State and Zl | P Code | | Column 2: The cred Check all schedules | | n you owe the debt |
| 3.1 | Name | | | ☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G. line☐ | | - |
| | Number Street City | State | ZIP Code | □ Scriedule G, IIfle | | - |
| 3.2 | Nama | | | ☐ Schedule D, line | | |
| | Name | | | ☐ Schedule E/F, lin☐ Schedule G, line | | - |
| | Number Street | | | | | |

State

City

ZIP Code

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| - :::: | :- 4b:- :- 64: 4 :- 14:6 | | | | | ı | | | | |
|---------------------------------|---|--|---|-----------------------|---------------|---------------------|---------------------|------------------------------------|-------------------------------------|-----------------|
| | in this information to identify your optor 1 Camara J T | | | | | | | | | |
| | otor 2 | • | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | e: EASTERN DISTRICT | OF PENNSYLVANIA | ١ | _ | | | | | |
| (If kn | fficial Form 106l | | | | | □ A □ A 1 | | d filing ent showi as of the | ing postpetition following date: | chapter |
| So | chedule I: Your Inc | ome | | | | | | | | 12/15 |
| sup spo atta | as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. The describe Employment | are married and not filing wing spouse is not filing wing wing the top of any addition | ng jointly, and your sith you, do not include | spouse i de inforr | s liv nati | ing with on abou | you, inclution your | ude info | rmation about nore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | or non- | filing spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | ■ Employed | | | ☐ Employed | | | |
| | information about additional | p.oyon ciatao | ☐ Not employed | | | | ☐ Not employed | | | |
| | employers. | Occupation | Limo Driver | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Self Employ | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | |
| <u> </u> | Oliva Datalla Albart Ha | How long employed the | here? 2 Years | i | | | _ | | | |
| Esti spou | mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to | late you file this form. If your ore than one employer, co | , g | • | Í | oyers for | that perso | n on the | lines below. If | J |
| | | | | | | For De | btor 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | | 0.00 | \$_ | N/A | |

| Deb | tor 1 | Camara J Thorpe | - | Ca | ase number (if known) | 18-14 | 64 | | |
|-----|---|---|--------------|----------|-----------------------|--------|------------------|----------------------|------------------|
| | Cop | by line 4 here | 4. | F | For Debtor 1 | | ebtor iling s | 2 or pouse N/A | |
| 5 | Lict | | | | | | | | _ |
| 5. | 5a. | all payroll deductions: Tax, Medicare, and Social Security deductions | 5a. | 9 | 0.00 | \$ | | NI/A | |
| | 5a. 5b. | Mandatory contributions for retirement plans | 5a. 5b. | | | \$ | | N/A N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | | \$ | | N/A | _ |
| | 5e. | Insurance | 5e. | 9 | 0.00 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | 9 | | \$ | | N/A | _ |
| | 5g. | Union dues | 5g. | | | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | 5h. | + \$ | 0.00 | + \$ | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | | \$ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | | N/A | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | 9 | 5 2,714.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | 9 | 0.00 | \$ | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | 9 | 0.00 | \$ | | N/A | <u>.</u> |
| | 8d. | . , . | 8d. | | | \$ | | N/A | _ |
| | 8e. | Social Security | 8e. | 9 | 0.00 | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | 9 | | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | | | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: IRS refund in 2016 for 2015 Return | 1 8h. | + (| 945.00 | + \$ | | N/A | _ |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 3,659.00 | \$ | | N/ | A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | ± | 3,659.00 + \$ | | N/A | = \$ | 3,659.00 |
| 10. | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | — | 3,039.00 | | 14/1 | - U | 3,039.00 |
| 11. | Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | | |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | 12. | \$ | 3,659.00 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | Combi month | ned ly income |
| | | No. | | | | | | | |
| | \neg | Voc Evoloin: | | | | | | | |

| Fill | in this informa | tion to identify yo | our case: | | | l | | | |
|-----------|----------------------------|---------------------------------------|----------------|---|--|-------------|---------|---|---|
| | otor 1 | Camara J Th | | | | Ch | | this is: | |
| | otor 2 ouse, if filing) | | | | | | As | upplement show | ving postpetition chapter the following date: |
| ` . | | ruptcy Court for the | : EASTE | RN DISTRICT OF PENN | SYLVANIA | | | 1/DD/YYYY | |
| | | | | | | | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | se number 18 nown) | 3-14564 | | | | | | | |
| 0 | fficial Fo | rm 106J | | | | | | | |
| S | chedule | J: Your | Exper | ises | | | | | 12/1 |
| info | ormation. If m | | eded, atta | If two married people a ch another sheet to this n. | | | | | |
| Par 1. | t 1: Descr | ibe Your House | ∌hold | | | | | | |
| ١. | No. Go to | | | | | | | | |
| | | =- | in a separ | ate household? | | | | | |
| | □и | | | | | | | | |
| | ПΥ | es. Debtor 2 mus | st file Offici | al Form 106J-2, <i>Expense</i> | s for Separate House | ehold of De | ebtor 2 | 2. | |
| 2. | Do you have | e dependents? | ☐ No | | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | Com | | | 44 | □ No |
| | dependents | names. | | | Son | | | 11 | ■ Yes □ No |
| | | | | | Daughter | | | 11 | ■ Yes |
| | | | | | Daughter | | | 12 | ■ Yes |
| | | | | | | | _ | | □No |
| 3. | Do your eyr | enses include | _ | | - | | | | ☐ Yes |
| J. | expenses o | f people other t d your depende | han 🗖 | No Yes | | | | | |
| Par | | ate Your Ongoi | | . . | | | | | |
| exp | | | | uptcy filing date unless y is filed. If this is a sup | | | | | |
| the | value of sucl | h assistance an | | government assistance luded it on <i>Schedule I:</i> | | | | Vour ovne | onese. |
| (Ot | ficial Form 10 |)6l.) | | | | | _ | Your expe | #11562 |
| 4. | | or home owners and any rent for th | | ses for your residence. r lot. | Include first mortgag | e 4. | \$_ | | 1,075.00 |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 |
| | 4b. Prope | rty, homeowner's | | | | 4b. | \$ | | 0.00 |
| | | | | ipkeep expenses | | 4c. | | | 0.00 |
| 5 | | owner's associat | | dominium dues our residence, such as h | omo oquity loons | 4d. | \$ • | | 0.00 |

| Debtor 1 Cam | ara J Thorpe | Case number | (if known) | 18-14564 |
|--|---|---------------------|------------|-------------------------------|
| | | | | |
| Utilities: 6a. Electi | ricity, heat, natural gas | 6a. \$ | | 250.00 |
| | • | · | | 250.00 |
| | r, sewer, garbage collection | 6b. \$ | | 75.00 |
| | hone, cell phone, Internet, satellite, and cable services | 6c. \$ | | 250.00 |
| | Specify: | 6d. \$ | | 0.00 |
| | ousekeeping supplies | 7. \$ | | 500.00 |
| | and children's education costs | 8. \$ | | 0.00 |
| | aundry, and dry cleaning | 9. \$ | | 100.00 |
| | are products and services | 10. \$ | | 100.00 |
| Medical and | d dental expenses | 11. \$ | | 0.00 |
| | tion. Include gas, maintenance, bus or train fare. | 12. \$ | | 150.00 |
| | de car payments. | * | | |
| | ent, clubs, recreation, newspapers, magazines, and books | 13. \$ | | 50.00 |
| | contributions and religious donations | 14. \$ | | 150.00 |
| 5. Insurance. | | | | |
| | de insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life ir | | 15a. \$ | | 0.00 |
| 15b. Healt | h insurance | 15b. \$ | | 0.00 |
| 15c. Vehic | ele insurance | 15c. \$ | | 0.00 |
| 15d. Other | insurance. Specify: | 15d. \$ | | 0.00 |
| 6. Taxes. Do r | not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Specify: | | 16. \$ | | 0.00 |
| . Installment | or lease payments: | | | |
| 17a. Car p | ayments for Vehicle 1 | 17a. \$ | | 0.00 |
| 17b. Car p | ayments for Vehicle 2 | 17b. \$ | | 0.00 |
| 17c. Other | : Specify: | 17c. \$ | | 0.00 |
| 17d. Other | | 17d. \$ | | 0.00 |
| | ents of alimony, maintenance, and support that you did not report | | | <u> </u> |
| | rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106 | | | 0.00 |
| | nents you make to support others who do not live with you. | \$ | | 0.00 |
| Specify: | | 19. | | |
| | property expenses not included in lines 4 or 5 of this form or on S | chedule I: Your | Income. | |
| | ages on other property | 20a. \$ | | 0.00 |
| - | estate taxes | 20b. \$ | | 0.00 |
| | erty, homeowner's, or renter's insurance | 20c. \$ | | 0.00 |
| | enance, repair, and upkeep expenses | 20d. \$ | | 0.00 |
| | emance, repair, and upkeep expenses eowner's association or condominium dues | 20d. \$ | | |
| | | • | | 0.00 |
| . Other: Spec | CITY: | 21+\$ | | 0.00 |
| 2. Calculate v | our monthly expenses | | | |
| • | es 4 through 21. | | \$ | 2,700.00 |
| | ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J- | l l | · | 2,100.00 |
| | | | · | 0.700.00 |
| 22c. Add lin | e 22a and 22b. The result is your monthly expenses. | ; | \$ | 2,700.00 |
| 3. Calculate v | our monthly net income. | | | |
| - | line 12 (your combined monthly income) from Schedule I. | 23a. \$ | | 3,659.00 |
| | your monthly expenses from line 22c above. | 23b\$ | | 2,700.00 |
| 200. Copy | your morning expenses from the 220 above. | 230\$ | | 2,100.00 |
| 23c Subtr | act your monthly expenses from your monthly income. | | <u> </u> | |
| | esult is your <i>monthly net income</i> . | 23c. \$ | | 959.00 |
| 11161 | ocar io your monary nor moonio. | | | |
| 4. Do vou exp | ect an increase or decrease in your expenses within the year afte | r vou file this for | m? | |
| For example, | do you expect to finish paying for your car loan within the year or do you expect | | | ease or decrease because of a |
| | o the terms of your mortgage? | 55.7 | | |
| ■ No. | | | | |
| ☐ Yes. | Explain here: | | | |

Case 18-14564-mdc Doc 12 Filed 07/25/18 Entered 07/25/18 01:03:38 Desc Main Document Page 24 of 24

| Fill in this informa | ation to identify yo | ur case: | | | |
|----------------------|---|-------------------------------|----------------------------|------------------------|--|
| Debtor 1 | Camara J Thor | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bank | ruptcy Court for the | EASTERN DISTRICT | OF PENNSYLVANIA | | |
| Case number 18 | 3-14564 | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | amonada ming |
| Official Form | 106Dec | | | | |
| | - | an Individua | l Dahtor's So | chadulas | 12/15 |
| | <u> </u> | <u>an marriaga</u> | . 20010. 0 0 | | 12/13 |
| If two married peo | ple are filing toget | her, both are equally respond | onsible for supplying co | rrect information. | |
| | r property by fraud | d in connection with a ban | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| Sign E | Below | | | | |
| Did you pay o | or agree to pay so | neone who is NOT an atto | orney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. Na | me of person | | | | nkruptcy Petition Preparer's Notice, |
| | | | | Declaration | n, and Signature (Official Form 119) |
| | of perjury, I decla rue and correct. | re that I have read the sun | nmary and schedules file | ed with this declarati | on and |
| X /s/ Cama | | | X | | |

Signature of Debtor 2

Date

Camara J Thorpe
Signature of Debtor 1

Date July 25, 2018